



## KENTUCKY LABOR CABINET

Division of Workers Compensation Funds  
Payment Branch

Suite 4, 1047 U.S. Highway 127 South  
Frankfort KY 40601  
[www.labor.ky.gov](http://www.labor.ky.gov)

**Steven L. Beshear**  
Governor

**Larry L. Roberts**  
Secretary

**Robert L. Whittaker**  
Director

**Telephone:** (502) 564-5467  
**FAX:** (502) 564-5112

SFAC

### ADDRESS CHANGE REQUEST FORM

*Please fill out all information completely.*

*Sign, date and mail form to:*      **Kentucky Labor Cabinet**  
**Division of Worker's Compensation Funds**  
**1047 US HWY 127 South - Ste. 4**  
**Frankfort, KY 40601**

*Please allow up to 4 weeks for the address change to take effect.*

CLAIM NUMBER: \_\_\_\_\_

CLAIMANT'S NAME: \_\_\_\_\_ SSN# \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF PAYEE

\_\_\_\_\_  
DATE

